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U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Terry Brown Plaintiff,

OV

08

CASE NO.

2258

vs.

Port of Oakland

Defendant(s).

EMPLOYMENT DISCRIMINATION
COMPLAINT

JL

1. Plaintiff resides at:

Address 915 E 21st Street

City, State & Zip Code Oakland, CA 94606

Phone 510-967-6872

2. Defendant is located at:

Address Jack London Square 530 Water Street

City, State & Zip Code Oakland, CA 94607

3. This action is brought pursuant to Title VII of the Civil Rights Act of 1964 for employment discrimination. Jurisdiction is conferred on this Court by 42 U.S.C. Section 2000e-5.

Equitable and other relief is sought under 42 U.S.C. Section 2000e-5(g).

4. The acts complained of in this suit concern:

a. ☒ Failure to employ me.

b. ☒ Termination of my employment.

c. ☐ Failure to promote me.

d. ☒ Other acts as specified below.

Title VII of the Civil Rights act of 1964 (Title VII).
The age Discrimination in employment act (ADEA).
The American with Disabilities act (ADA)

5. Defendant's conduct is discriminatory with respect to the following:

a. ☒ My race or color.

b. ☐ My religion.

c. ☒ My sex.

d. ☒ My national origin.

e. ☒ Other as specified below.

retaliation, (For pointing out who caused my injuries)

6. The basic facts surrounding my claim of discrimination are: The Port of Oakland is known for rehiring those who retire from employment. I was forced to retire under emotional distress I didn't realize what I had done see (Exhibits doctors).

there has been an ongoing harassments, I was yeld at, forced to sign papers, or and threatening my job ability. then at last I was surposed to have made a threat to the Port of Oakland as like a terrorist. this came from Bill Edwards my Job Foreman, and I was treated as if I made threat.

7. The alleged discrimination occurred on or about it started Late 1997 Thru this day. Because they yet have not hired me back. (DATE) 5.7.08

8. I filed charges with the Federal Equal Employment Opportunity Commission (or the California Department of Fair Employment and Housing) regarding defendant's alleged

Also EEOC Exhibits 1, 2, 4, 5, 6, (Thank you)
Please See Doctor Exhibits 1-4 and those that I have not enclosed
discussed a sub attached later etc exhibits

discriminatory conduct on or about Late from 1997 to today 5-2008
 not allowing me my job back. Please see Exhibits and doctor
 papers of my mental Disorder. (DATE) (I actually knew not what
 to do where to go.
 9. The Equal Employment Opportunity Commission issued a Notice-of-Right-to-Sue letter
 (copy attached), which was received by me on or about 3-20-08.

(DATE)

10. Plaintiff hereby demands a jury for all claims for which a jury is permitted:

Yes X No

11. WHEREFORE, plaintiff prays that the Court grant such relief as may be appropriate,
 including injunctive orders, damages, costs, and attorney fees.

DATED: 5-7-08

Terry Brown
 SIGNATURE OF PLAINTIFF

(PLEASE NOTE: NOTARIZATION
 IS NOT REQUIRED.)

Terry Brown

PLAINTIFF'S NAME

(Printed or Typed)



EQUAL EMPLOYMENT OPPORTUNITY COMMISSION **INTAKE QUESTIONNAIRE**

55

Exhibits ①

Please immediately complete the entire form and return it to the U.S. Equal Employment Opportunity Commission ("EEOC"). **REMEMBER**, a charge of employment discrimination must be filed within the time limits imposed by law, generally within 180 days or in some places 300 days of the alleged discrimination. Upon receipt, this form will be reviewed to determine EEOC coverage. Answer all questions as completely as possible, and attach additional pages if needed to complete your response(s). Incomplete responses may delay the processing of your questionnaire. If you do not know the answer to a question, answer by stating "not known." If a question is not applicable, write "n/a."

(PLEASE PRINT)

1. Personal Information

Last Name: Brown, First Name: Terry MI: Don
 Street or Mailing Address: P.O. Box 5279 Apt Or Unit #: _____
 City: Oakland County: Alameda State: CA Zip: 94605
 Phone Numbers: Home: (510) 967-6872 Work: () 0
 Cell: 510 967-6872 Email Address: 0
 Date of Birth: 10-9-58 Sex: Male ☒ Female _____ Race: Black
 National Origin / Ethnicity _____ Do You Have a Disability? ☒ Yes ☐ No

Provide The Name Of A Person We Can Contact If We Are Unable To Reach You:

Name: Carl Brown Relationship: Brother
 Address: 915 Glacier Court City: Vallejo State: CA Zip Code: 94591
 Home Phone: 707 556-3376 Other Phone: 510 427-8816

I believe that I was discriminated against by the following organization(s): (Check those that apply)

Employer ☒ Union _____ Employment Agency _____ Other (Please Specify) _____

2. Organization Contact Information

Organization #1 Name: Port of Oakland
 Address: P.O. Box 2064 County: ALAMEDA
 City: Oakland State: CA Zip: 94604 Phone: ()
 Type of Business: Public Services Job Location if different from Org. Address: _____
 Human Resources Director or Owner Name: James E. Allen Phone: 510 834-4591
627-1100
 Number of Employees in the Organization at All Locations: Please Check (✓) One
 Less Than 15 _____ 15 - 100 _____ 101 - 200 _____ 201 - 500 _____ More 500
272-1100

Organization #2 Name: _____

Address: _____ County: _____

City: _____ State: _____ Zip: _____ Phone: () _____

Type of Business: _____ Job Location if not at Org. Address: _____

Human Resources Director or Owner Name: _____ Phone: _____

Number Of Employees In The Organization At All Locations: please check (✓) one

Less Than 15

15 - 100

101 - 200

201 - 500

More 500

3. Your Employment Data (Complete as many items as you can)

Date Hired: MAY of 95 Job Title At Hire: Semi Skilled LaborerPay Rate When Hired: 3,000 monthly Last or Current Pay Rate: about 4,000Job Title at Time of Alleged Discrimination: Semi Skilled LaborerName and Title of Immediate Supervisor: Julian Valero / Via John KachmsIf Applicant, Date You Applied for Job yr 1995 Job Title Applied For Semi Skilled Laborer

4. What is the reason (basis) for your claim of employment discrimination?

FOR EXAMPLE, if you are over the age of 40 and feel you were treated worse than younger employees or you have other evidence of discrimination, you should check (✓) AGE. If you feel that you were treated worse than those not of your race or you have other evidence of discrimination, you should check (✓) RACE. If you feel the adverse treatment was due to multiple reasons, such as your sex, religion and national origin, you should check all three. If you complained about discrimination, participated in someone else's complaint or if you filed a charge of discrimination and a negative action was threatened or taken, you should check (✓) RETALIATION.

☒ Race☒ Sex☒ Age☒ Disability☒ National Origin☒ Color☒ Religion☒ Retaliation☐ PregnancyOther reason (basis) for discrimination (Explain): Right to work in safe environment 1998A Supervisor totally unhappy with his position. Assaulted twice nothing was done

5. What happened to you that you believe was discriminatory? Include the date(s) of harm, action(s) and include the name(s) and title(s) of the persons who you believe discriminated against you. (Example: 10/02/06

Written Warning from Supervisor, Mr. John SotoA) Date: 2000 thru today Action: after taking or excepting a position 1997from immediate Foreman. the Supervisor didn't want me to take positionName and Title of Person(s) Responsible: Supervisors: Julian Valero Via John KachmsB) Date: from on going today Action: In 2000 I went to file a complaintwith the Port of Oakland which was also denied.Name and Title of Person(s) Responsible: Foreman: Bill Edwards, (for threatening me).Sab + Carriere

Describe any other actions you believe were discriminatory.

I was physically assaulted. 1998 nothing was done.
1999 I was mentally assaulted and my life
was threatened by Victor Rodriguez. a friend of
John Kachms. John Kachms hired Victor R.
after I was hit by Rickie Lapp. John seen
how afraid I was. nothing was done. John K. broken
the Policy Law from the Port of Oakland and hired this man
 (Attach additional pages if needed to complete your response.) to put more fear in my life

Exhibit ②

11. Are there any witnesses to the alleged discriminatory incidents? If yes, please identify them below and indicate what they will say. Add additional pages if necessary.

A.

NAME	JOB TITLE	ADDRESS & PHONE NUMBER
any and everyone that worked in the same facilities that i worked.		

B.

NAME	JOB TITLE	ADDRESS & PHONE NUMBER
Same as above		

C.

NAME	JOB TITLE	ADDRESS & PHONE NUMBER
Same as above		

12. Have you filed a charge previously in this matter with EEOC or another agency? YES ☒ NO ☐

13. If you have filed a complaint with another agency, provide name of agency and date of filing:

Worker Comp year 2000 or something also within the port of Oakland

14. Have you sought help about this situation from a union, an attorney, or any other source?

YES ☒ NO ☐ - If yes, from whom and when? Provide name of organization, name of person you spoke with and date of contact. Results, if any?

Local 790 didnt get no help at all (pretend)
Worker Comp attorney but to no avail.
and myself being in Pro Per.

Terry D. Brown
Signature

11-13-07
Today's Date

If you have not heard from an EEOC office within 30 days of mailing this form, please call toll-free number shown on the letter accompanying this form. Provide the tracking number on the attached cover letter. Please make a copy of this form for your records before mailing.

PRIVACY ACT STATEMENT: This form is covered by the Privacy Act of 1974: Public Law 93-579. Authority for requesting personal data and the uses thereof are:

1. FORM NUMBER/TITLE/DATE. EEOC Intake Questionnaire (10/2006).
2. AUTHORITY. 42 U.S.C. § 2000e-5(b), 29 U.S.C. § 211, 29 U.S.C. § 626, 42 U.S.C. 12117(a)
3. PRINCIPAL PURPOSE. The purpose of this questionnaire is to solicit information in an acceptable form consistent with statutory requirements to enable the Commission to act on matters within its jurisdiction. When this form constitutes the only timely written statement of allegations of employment discrimination, the Commission will, consistent with 29 CFR 1601.12(b) and 29 CFR 1626.8(b), consider it to be a sufficient charge of discrimination under the relevant statute(s).
4. ROUTINE USES. Information provided on this form will be used by Commission employees to determine the existence of facts relevant to a decision as to whether the Commission has jurisdiction over allegations of employment discrimination and to provide such charge filing counseling as is appropriate. Information provided on this form may be disclosed to other State, local and federal agencies as may be appropriate or necessary to carrying out the Commission's functions. Information may also be disclosed to respondents in connection with litigation.
5. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION. The providing of this information is voluntary but the failure to do so may hamper the Commission's investigation of a charge of discrimination. It is not mandatory that this form be used to provide the requested information.

6. What reason(s) were given to you for the acts you consider discriminatory? By whom? Title?

John Kachnas told me himself when i got hired at the Port of Oakland. He said, Terry i know what your capable of and what you can do. he said I can Fly Airplanes & have my own, I deep sea dive. And hear i am stuck down here. I didnt realize what he was saying.

7. Name and describe others who were in the same situation as you. Explain any similar or different treatment. Who was treated worse, who was treated better, and who was treated the same? Provide race, sex, age, national origin, religion, and/or disability status of comparator if known and if connected with your claim of discrimination. Add additional sheets if needed.

Full Name

Job Title

Description

1. GUBUR Gilbert SP Garder / Semi Skilled Retired, then rehired
2. all employees at harbour with badge had entree to building

3. Jerry Bizzle died. Supervisor: John K. was removed from his duty. I had to be removed. not I.

Answer questions 8-10 only if you are claiming discrimination based on disability. If not, skip to question 11. I exposed who cause my injuries. but yet it takes the death from a person that can't defend himself.

8. Please check all that apply:

- Yes, I have an actual disability ☒ I mentally barley made,
 I have had an actual disability in the past ☒ it feels very hard
 No disability but the organization treats me as if I am disabled to live.
 or want to live

9. If you are alleging discrimination because of your disability, what is the name of your disability? How does your disability affect your daily life or work activities, e.g., what does your disability prevent or limit you from doing, if anything? (Example: lifting, sleeping normally, breathing normally, pulling, walking, climbing, caring for yourself, working, etc.).

Mental disorder, totally depressed and everything the doctor has started. feel like I'm living a lost life. I didnt mean to quit my job. I have lots of back pain and pain threw out my body. I was admitted to Meritt hospital (suicide thoughts)

10. Did you ask your employer for any assistance or change in working condition because of your disability?

YES ☐ NO ☒ The doctor Requested but didnt want to leave the Airport

Did you need this assistance or change in working condition in order to do your job?

YES ☒ NO ☐ I requested transfer but not away from Airport.

If "YES", when? ind 997 To whom did you make the request? Provide full name of person _____ How did you ask (verbally or in writing)? Verbally

Describe the assistance or change in working condition requested?

After Meritt Miller died ~~employee~~ I was requestig his position away from John Kachnas. even a different hour shift but yet still at the Airport and mainly working inside the Airport. I got knothing but the run around



**U.S. Equal Employment Opportunity Commission
San Francisco District Office**

Exhibit 4

350 The Embarcadero
Suite 500
San Francisco, CA 94108
(415) 625-5802
TTY (415) 625-5610
FAX (415) 625-5809

Respondent: PORT OF OAKLAND
EEOC Charge No.: 555-2008-00141
FEPA Charge No.:

January 23, 2008

Terry D. Brown
P.O. Box 5279
Oakland, CA 94605

Dear Mr. Brown:

This is with reference to your recent inquiry (an office visit, phone call, or correspondence) in which you alleged employment discrimination by the above-named respondent. The information provided indicates that the matter complained of is subject to one or more of the following laws:

- ☒ Title VII of the Civil Rights Act of 1964 (Title VII)
- ☒ The Age Discrimination in Employment Act (ADEA)
- ☒ The Americans with Disabilities Act (ADA)
- ☐ The Equal Pay Act (EPA)

The attached EEOC Form 5, Charge of Discrimination, was drafted as a result of the information provided. To enable proper handling of this action by the Commission you should:

- (1) Review the enclosed charge form and make corrections.
- (2) Sign and date the charge in the bottom left hand block where I have made an "X". The date of signature on the charge will not affect the jurisdiction date established in any original written complaint previously given to EEOC.
- (3) Return the signed charge to this office in the enclosed postage paid envelope.

Since charges should be processed within the time limits imposed by law, please complete these steps as soon as possible. Please call me at the number listed below if you have any questions. If you have to call long distance, please call collect.

- ☒ Please be aware that the EEOC will send a copy of the charge to the agency listed below as required by our procedures. If that agency processes the charge, it may require the charge to be signed before a notary public or an agency official. Then the agency will investigate and resolve the charge under their statute. If this occurs, section 1601.76 of EEOC's regulations entitles you to ask us to perform a Substantial Weight Review of the agency's final finding. To obtain this review, a written request must be made to this office within 15 days of receipt of the agency's final finding in the case. Otherwise, we will generally adopt the agency's finding as EEOC's.

California Department Of Fair Employment & Housing
611 W. 6th St., Ste.1500
Los Angeles, CA 90017

EEOC Form 5 (5/01)

Exhibit 5

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To:

Agency(ies) Charge No(s):

☐ FEPA
☒ EEOC

555-2008-00141

California Department Of Fair Employment & Housing

and EEOC

State or local Agency, if any

Name (indicate Mr., Ms., Mrs.)

Mr. Terry D. Brown

Home Phone (Incl. Area Code)

(510) 967-6822

Date of Birth

10-08-1958

Street Address

City, State and ZIP Code

P.O. Box 5279, Oakland, CA 94605

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name

PORT OF OAKLAND

No. Employees, Members

500 or More

Phone No. (Include Area Code)

(510) 272-1346

Street Address

City, State and ZIP Code

530 Water Street, P.O. Box 2064, Oakland, CA 94604

Name

No. Employees, Members

Phone No. (Include Area Code)

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)

☒ RACE ☐ COLOR ☒ SEX ☐ RELIGION ☐ NATIONAL ORIGIN
☐ RETALIATION ☒ AGE ☒ DISABILITY ☐ OTHER (Specify below.)
DATE(S) DISCRIMINATION TOOK PLACE
Earliest Latest**12-31-2007**☐ CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

I was hired by Respondent in May 1995. My most recent job title was Semi-skilled Laborer. In 2001, I unknowingly retired from my position. Since that time, I have tried to be reinstated, but to no avail.

Respondent gave no reason for its refusal to reinstate me.

I believe that I have been discriminated against because of my age, 49, in violation of the Age Discrimination in Employment Act of 1967. I believe that I have been discriminated against in violation of the Americans with Disabilities Act of 1990. I further believe that I have been discriminated against because of my sex, male and race, Black, in violation of Title VII of the Civil Rights Act of 1964, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

RECEIVED

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE 1 2008
(month, day, year)

EEOC-SFDO

Date

Charging Party Signature

EEOC Form 161 (3/86)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

Exhibit 6^{is}**DISMISSAL AND NOTICE OF RIGHTS**

To: **Terry D. Brown**
P.O. Box 5279
Oakland, CA 94605

From: **San Francisco District Office**
350 The Embarcadero
Suite 500
San Francisco, CA 94105

☐

On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

555-2008-00141

Bryne A. Moore,
Investigator

(503) 477-6056**THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:**☐

The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.

☐

Your allegations did not involve a disability as defined by the Americans With Disabilities Act.

☐

The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.

☒

Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge.

☐

Having been given 30 days in which to respond, you failed to provide information, failed to appear or be available for interviews/conferences, or otherwise failed to cooperate to the extent that it was not possible to resolve your charge.

☐

While reasonable efforts were made to locate you, we were not able to do so.

☐

You were given 30 days to accept a reasonable settlement offer that affords full relief for the harm you alleged.

☐

The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.

☐

The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.

☐

Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, and/or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed **WITHIN 90 DAYS** of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a state claim may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that backpay due for any violations that occurred **more than 2 years (3 years)** before you file suit may not be collectible.

On behalf of the Commission



Michael Baldonado,
Acting Director



(Date Mailed)

Enclosures(s)

cc: **David L. Alexander**
Port Attorney
PORT OF OAKLAND
530 Water Street
P.O. Box 2064
Oakland, CA 94604

11-13-07
Discrimination Exhibit (4)

(continued)

I spoke first our manager Karl Kuhlmann

I spoke first with our manager Karl Kuhlmann he said he did not know anything about what they're going to do. Talk to they're supervisor.

So, i talked to there facilities supervisor , he saated he didn't know what was going to happen. Go talk to human resources. So iwent. I go to main office .I can't recall names; but the mention of the name will bring back memory..

DISCRIMINATION CONTINUED - Too this day.
 5.7.2008
 not allowing a return

first; I was removed from working at the Oakland Airport location after stating who, and what caused my on the job injuries.

Supposingly to get away from a hostile environment.

same supervisor was removed from his position after the death of his immediate foreman Jerry Bizzel which many employees blamed his supervisor John Kaehms.

SECOND; year 2001 . I reported for work duty with proper I.D for in and out you need your job I.D, to enter your job facilities. I was picked out not allowed in building. I entered building after being called to meeting. I was stopped by security and escorted out of the building right now you can't go any further. EVERYONE else was allowed in building and any where else.

1998 i was physically assaulted by employee name Rickie Lopp Nothing was never done. I feared for my job.

and 1999 i was mentally assaulted by ^{two other} employees named Victor Rodgrist ^{Temporary worker} Dick Stillwell from gardening facilities. over an issue John Kaehms. ^{John Kaehms hire.} created. Leadman Billy Mayfield witnessed this himself.

THIRD; 2001 i unknowingly retired from my job with the Port of Oakland when i realized what i done i was admitted to herrit hospital via kaiser hospital. I've been trying to get my job back since this day. It feels like i never had any rights. Like not having the right to live, ifelt stripped of everything I could not believe that i retired from such a beautiful job less than 5 miles away from home. see Doctor report.

THANK YOU

Temp Bro

FROM :

Doctor Exhibit

FAX NO. :

Feb. 15 2002 09:19AM P2

PHILIP COLEMAN, Ph.D.

Clinical Psychologist

DEPT OF INDUSTRIAL RELATIONS
DWC/WCAB

2100 Lakeshore Avenue
Oakland, California 94606
(510) 763-0105

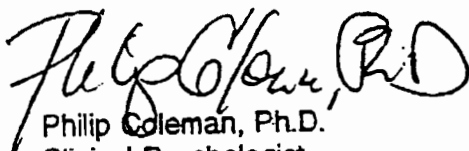
February 14, 2002

Attorney Raymond Wright
20980 Redwood Road, Suite 260
Castro Valley, CA 94546

Dear Attorney Wright:

Mr. Terry Brown was in psychological treatment with me from April, 1999 to March 2001. As the treating psychologist, I would like to state that I hold the opinion that Mr. Brown was greatly emotionally disturbed when he resigned from his position with the Port of Oakland. His decision was influenced by his severe depression, paranoid delusional state, and fear of retaliation from supervisors and co-workers. I do not believe he would have made this same decision if he had been in a rational, less emotionally disturbed state.

Sincerely,


Philip Coleman, Ph.D.
Clinical Psychologist

DEC 06 '00 10:32AM

P. 2/3

Doctor Ex H 2

PHILIP COLEMAN, Ph.D.

Clinical Psychologist

2100 Lakeshore Avenue
Oakland, California 94606
(510) 763-0105

November 16, 2000

Lisa Bartlow
Workers' Compensation Adminisstrator
530 Water Street
P.O. Box 2064
Oakland, CA 94604-2064

Dear Ms. Bartlow:

I am aware that Mr. Brown returned to work on November 1, 2000. Prior to Mr. Brown being permitted to work, Mr. Brown's superintendent requested a release order from me. Pursuant to Dr. Whyman's recommendation, I released Mr. Brown to return to work duty.

I am adhering to Dr. Whyman's recommendations regarding required treatment for Mr. Brown. He is continuing in once weekly psychotherapy with me. In addition, I referred Mr. Brown to Richard Unger, M.D. for medication evaluation. Dr. Unger has prescribed a trial of celexa for Mr. Brown.

Mr. Brown's current diagnostic status is Major Depressive Episode with Psychotic Features in Partial Remission.

Although Mr. Brown has returned to work, he continues to suffer from intermittent depressive mood, generalized anxiety, intrusive thoughts of a paranoid nature, and fatigue. In addition, Mr. Brown continues to suffer from vegetative disturbances. He reports getting about two to four hours of sleep at night, resulting from intermittent and early morning waking. His appetite is slight; he eats at most a sandwich daily. His energy level is low; after work he is exhausted and goes to bed.

Upon returning to work, Mr. Brown was placed on modified duty by Stephen Miller, M.D., due to orthopaedic pain in the back, neck and shoulder regions. I am enclosing a copy of his modified work order. Understandably, Mr. Brown's chronic pain condition exacerbates his mood disorder condition.

It is my estimation that continued psychotherapy and medication will alleviate Mr. Brown's dysphoria and somatic problems.

FEB 20 '01 10:42AM

P.2/2

RICHARD C. UNGER, PH.D., M.D.
DIPLOMATE IN PSYCHIATRY

Doctor Exhibit # 3

2507 ALCATRAZ AVENUE • BERKELEY, CA 94705
510 • 855 • 0890

February 13, 2001

Lisa Bartlow
Worker's Compensation Administration
Port of Oakland
530 Water Street
P. O. Box 2064
Oakland, CA 94604

Re: Terry BROWN
Case #: 99-0018

Dear Ms. Bartlow:

This letter is in follow up to our recent conversation regarding Mr. Brown.

As you are well aware, Mr. Brown has been receiving psychological care from Phillip Coleman, Ph.D. due to psychological distress relating to Mr. Brown's employment at the Port of Oakland. In the course of his treatment of Mr. Brown, Dr. Coleman became concerned about the severity of Mr. Brown's condition and referred Mr. Brown to me for a psychiatric opinion. In specific, he wanted to know whether psychiatric medications would be a useful addition to psychological counseling in Mr. Brown's condition.

I met with Mr. Brown on November 20, 2000 for a 70 minutes long psychiatric evaluation appointment. During this appointment, based upon my assessment of Mr. Brown's condition I recommended that he begin treatment with the anti-psychotic medication Risperdal. I prescribed this medication and discussed its use and side effects with Mr. Brown.

Mr. Brown's psychiatric condition is quite severe. He suffers from Delusional disorder, paranoid type (DSM-IV 297.1) centered almost exclusively around events that occurred to him during his work at the Port of Oakland. This is a rather unusual disorder, distinct from schizophrenia, but generally very difficult to treat and slow to respond to treatment. Medications of varying utility in the treatment of this disorder but are certainly worth trying as they at times do reduce symptom severity.

After my meeting with Mr. Brown I spoke with Dr. Coleman by telephone and conveyed to him my diagnosis and recommendations for further treatment.

If you require further information in order to pay for the services I provided to your insured, please contact me directly at my office.

Cordially,



Richard C. Unger, Ph.D., M.D.

Doctor Exhibit 4

ALAMEDA COUNTY
MEDICAL CENTER

Highland Campus • Fairmont Campus
John George Psychiatric Pavilion
Ambulatory Healthcare Services

10/15/03

To Whom It May Concern:

Mr. Terry Brown is a patient at Highland Hospital
(since 10/01) where he has been treated for many[^] years. His medical problems
lead to difficulty focusing on specific ~~even~~ items, making remembering
dates difficult.

Please call with any questions.

Sincerely,

Bhrett Lash, MD
#066076 Resident
Internal Medicine

Highland Hospital Clinic Scheduling Unit 1411 E. 31st St Oakland, CA 94602	
You have an appointment with	
GEN MED RES. LASH	TERRY BROWN
on 10/15/2003 at 01:00PM	915 E21ST ST # OAKLAND, CA 94606
PLEASE ARRIVE ONE HOUR before your appointment, but n before 7:00 a.m. THERE IS A \$1.00 Charge for MEDI-CA CO-PAYMENTS OR FOR REPLACEMENT OF LOST CLINIC CARDS.	
IF YOU WISH TO CANCEL OR RESCHEDULE YOUR APPOINTMENT	
SURGERY/UROLOGY 437-4012	PEDIATRICS 437-8515
ALL OTHER CLINI 437-8500	

Highland Campus

1411 East 31st Street • Oakland, California 94602 • (510) 437-4800